



The Official Publication of the Missouri State Board of Nursing with a quarterly circulation of approximately 120,000 to all RNs and LPNs



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Message from the President

Mariea Snell DNP, APRN, FNP-C

I consider my work on the board to be one of privilege and honor. This honor has been broadened by my recent election to President of the Board of Nursing. Having served on the board since 2013 and as Vice-President for the past year, I have learned a tremendous amount on the issues of regulation and practice, largely as a result of the outstanding leadership here on the board. I would like to thank Rhonda Shimmens for her direction as President

over these past two years. She has, and continues to be, a valuable member of the board and the healthcare community.

The mission of the Board of Nursing is to protect the public. As part of that, we look to the community for involvement and engagement on issues of concern. As president, I invite you to reach out to the board to discuss concerns that you may have or initiatives that could support the community. You may contact the board via email at nursing@pr.mo.gov.

Executive Director Report

Authored by Lori Scheidt, Executive Director

Board Elects Officers at their September 2016 Board Meeting

Mariea Snell, DNP, MSN, RN, FNP-BC was elected President. Dr. Snell is the coordinator of the Doctor of Nursing Practice program for Maryville University. In addition to her faculty and administrative role, she practices as a Family Nurse Practitioner for Peoples Health Centers in St. Louis. She holds a doctorate in nursing from St. Louis University, a master's of science in nursing from Indiana State with a concentration in family practice and a bachelor's in nursing from Barnes Jewish College of Nursing at Washington University Medical Center. Dr. Snell has extensive experience in research, education and community health. Snell has a passion for working with the underserved and embarked on her nursing career to reach groups that need care the most. She has been on the board since February 2013.

Anne Heyen DNP, MSN, RN, CNE was elected Vice President. Dr. Heyen is an Associate Professor of Nursing at Lincoln University, in Jefferson City. She serves as a test writer for Certified Nurse Educator Exam and National Council of State Boards of Nursing Registered Nurse Exam. Her clinical expertise is in medical surgical and post anesthesia care nursing. Dr. Heyen holds a doctor of nursing practice with an emphasis in nursing leadership from Rush University, Chicago, IL; a master's in nursing degree from the University of Missouri, Columbia and a bachelor of nursing degree from Avila University, Kansas City. Dr. Heyen serves as a reviewer for peer reviewed journals in her area of expertise. She is passionate about the education of future nurses, having been in undergraduate nursing education for 11 years. Dr. Heyen is deeply committed to nursing students becoming safe practicing nurses by focusing on the critical thinking skills needed in nursing. She was appointed to the Board in 2015.

Alyson Speed, LPN was re-elected as secretary. Ms. Speed is a licensed practical nurse with CoMo Cubs Pediatrics in Columbia. In addition to CoMo

Cubs Pediatrics, she has been a preceptor for nursing students in a pediatric setting for the past several years. Ms. Speed earned her Licensed Practical Nursing degree from Columbia Area Career Center, Program of Practical Nursing. She was recently accepted into the nursing program at Columbia College in order to further to pursue her love of caring for others. She enjoys working with children and hopes to continue that work after completing RN school. Ms. Speed has served on the Board since January 2014.

2016 Fiscal Year Statistics

The 2016 fiscal year for Missouri State government began July 1, 2015 and ended June 30, 2016.

The Board reviews complaints that are filed against the license of a nurse. Following an investigation, the Board determines whether or not to pursue discipline. The Board may impose censure, probation, suspension, and/or revocation.

The Board of Nursing may take disciplinary action against a licensee for violation of the Nursing Practice Act (see 335.066, RSMo). The Board is authorized to impose any of the following disciplines singularly or in combination:

- Censure—least restrictive discipline. The imposition of censure acts as a public reprimand that is permanently kept in the licensee's file.
- Probation—places terms and conditions on the licensee's license.
- Suspension—requires that the licensee cease practicing nursing for a period not to exceed 3 years.
- Revocation—most restrictive discipline. The imposition mandates that the licensee immediately loses his/her license and may no longer practice nursing in Missouri.

The following charts show the category and source of complaint and application reviews that were closed this past fiscal year. There were 2405 Board decisions that became effective fiscal year 2016.

Executive Director continued on page 3



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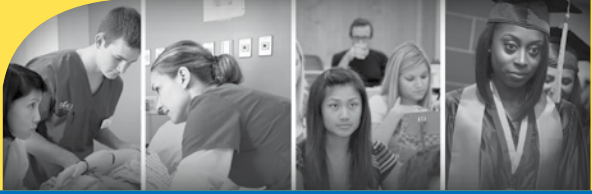
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 - Family Nurse Practitioner (FNP)
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 - Women's Health Nurse Practitioner (WHNP)
 - Additional Tracks:**
 - Psychiatric Mental Health Nurse Practitioner (PMHNP)
 - Neonatal Nurse Practitioner (NNP) | Nurse Educator (NE)
- * **PhD in Nursing**
- * **DNP**
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 - MSN to DNP: APRN MSN to DNP; APRN MSN to DNP for a Second NP track
- Tracks:**
 - Pediatric Nurse Practitioner (PNP)(Acute Care PNP is post MSN only)
 - Women's Health Nurse Practitioner (WHNP)
 - Family Nurse Practitioner (FNP)
 - Adult Gerontology Primary Care Nurse Practitioner (AGNP)
- * **Post Masters Certificates**

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Important Telephone Numbers




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Missouri State Association for Licensed Practical Nurses (MoSALPN)	573-636-5659
Missouri Nurses Association (MONA)	573-636-4623
Missouri League for Nursing (MLN)	573-635-5355
Missouri Hospital Association (MHA)	573-893-3700

Number of Nurses Currently Licensed in the State of Missouri

As of October 3, 2016

Profession	Number
Licensed Practical Nurse	23,268
Registered Professional Nurse	106,925
Total	130,193



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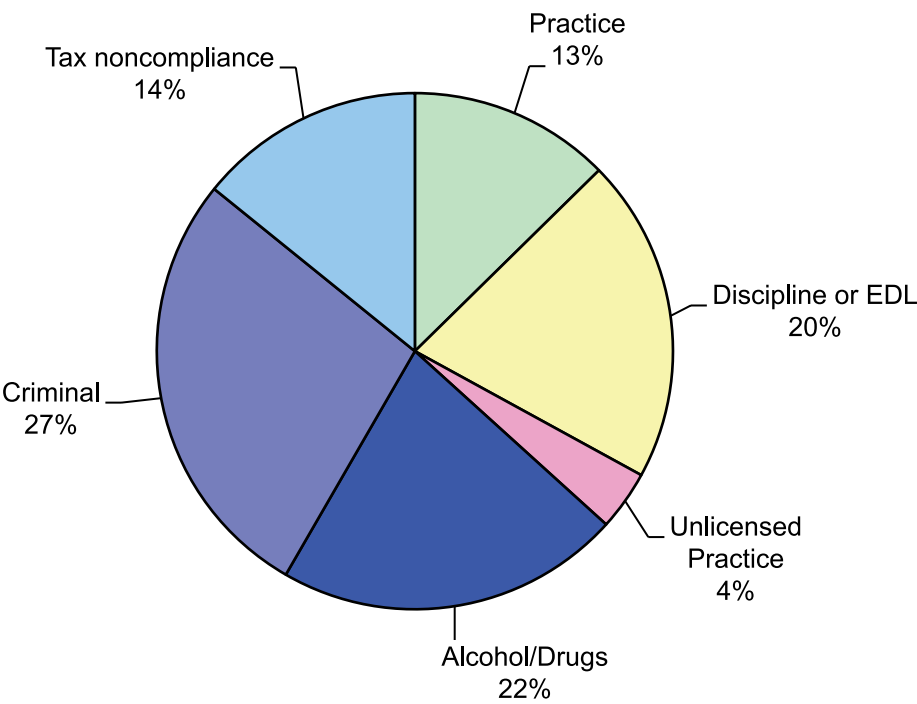
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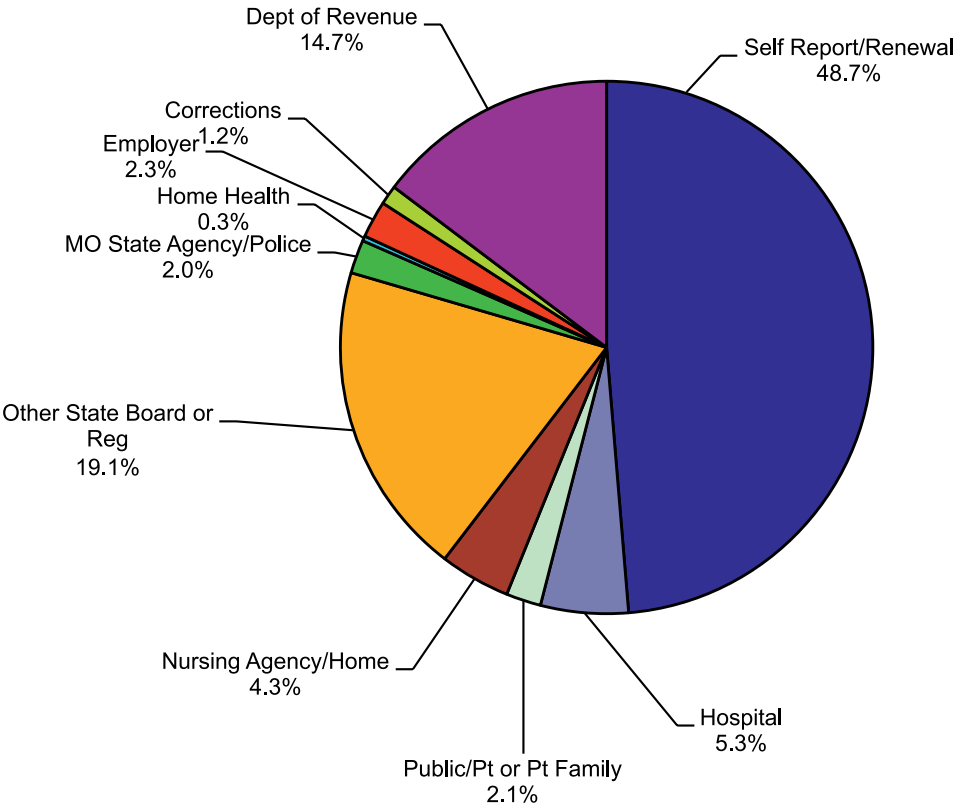
Executive Director Report

Executive Director continued from page 1

Complaint Categories FY 2016

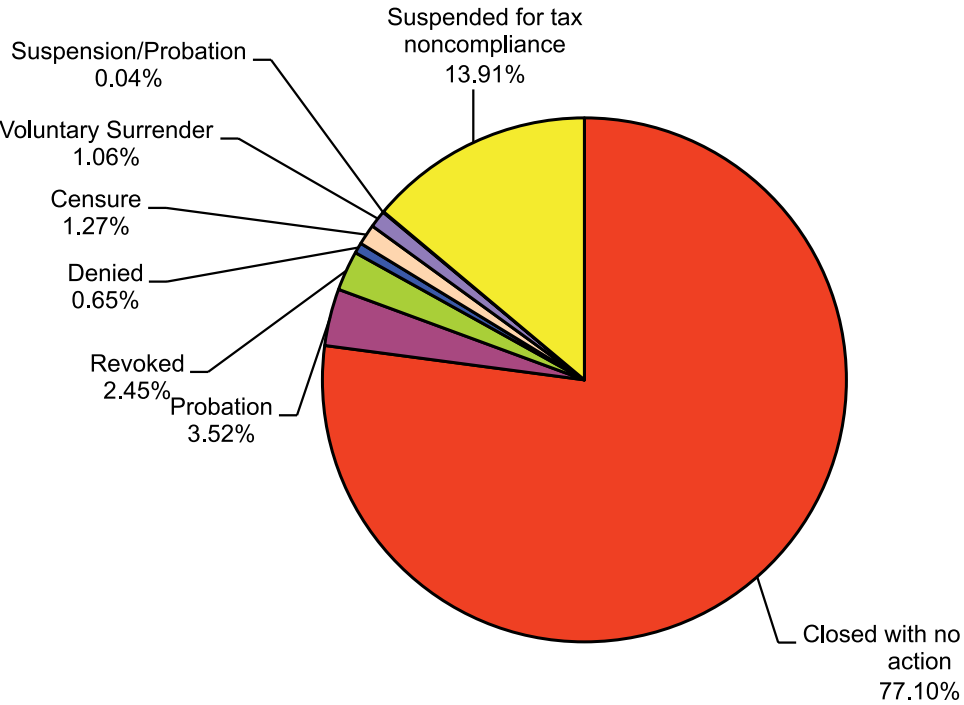


Closed Complaints By Source FY 2016



The next chart shows the actions taken by the Board for those complaints and application reviews.

Final Actions FY 2016



Licenses Issued in Fiscal Year 2016

	Registered Nurse	Licensed Practical Nurse
Licensure by Examination (includes nurses not educated in Missouri)	4,461	1,302
Licensure by Endorsement	2,036	272
Licensure by Renewal of a Lapsed or Inactive License	1,337	301
Number of Nurses holding a current nursing license in Missouri as of 6/30/2016	105,014	25,478

There were 1,099 new Advanced Practice Registered Nurse applications approved in fiscal year 2016.

The Board granted 222 nurses advanced prescriptive authority in fiscal year 2016. There are currently 1,339 Advanced Practice Registered Nurses with controlled substance prescriptive authority.

Executive Director continued on page 4

BJC HealthCare

Alton Memorial Hospital

* Barnes-Jewish Hospital

Barnes-Jewish St. Peters Hospital

Barnes-Jewish West County Hospital

* Boone Hospital Center

Christian Hospital

* Memorial Hospital Belleville

Memorial Hospital East

* Missouri Baptist Medical Center

Missouri Baptist Sullivan Hospital

Parkland Health Center

Parkland Health Center Bonne Terre

Progress West Hospital

* St. Louis Children's Hospital

The Rehabilitation Institute of St. Louis

* Magnet Hospital Designation

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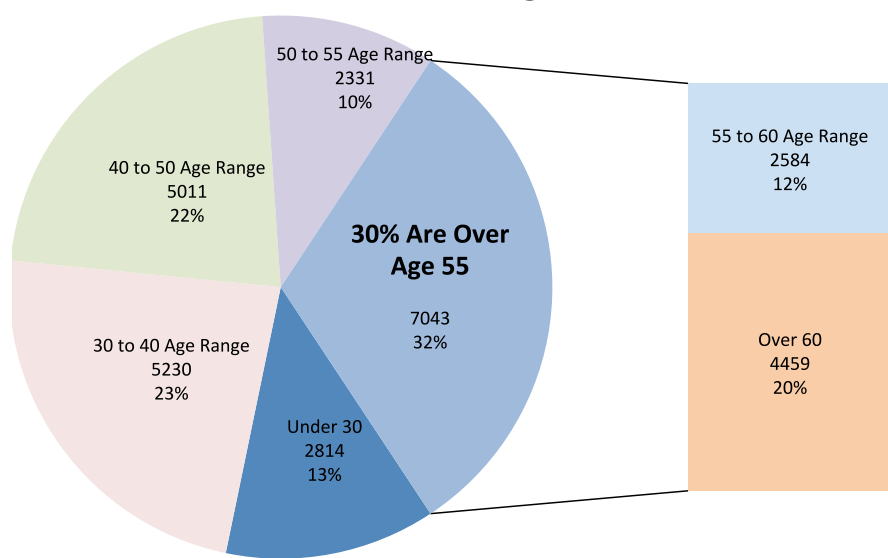
Executive Director Report

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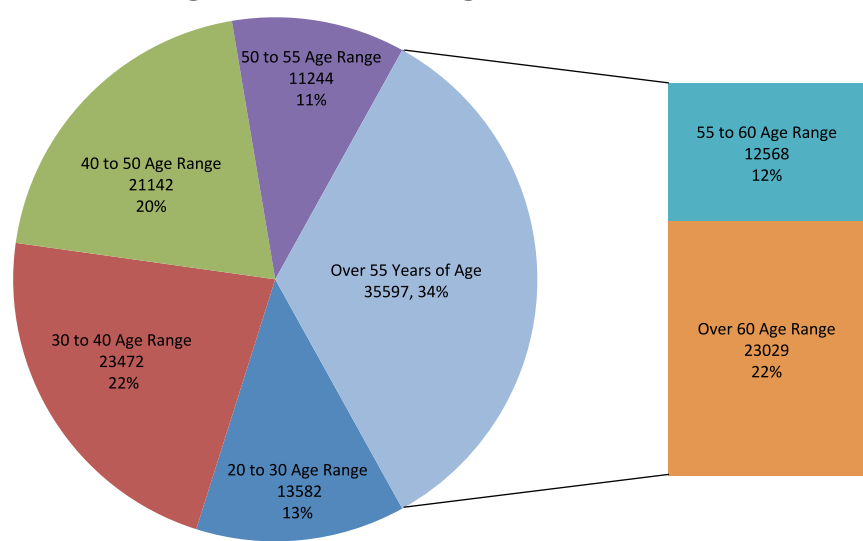
Age Distribution

The board continues to keep a close eye on the age distribution of nurses as many are at or near retirement.

Licensed Practical Nurses Age Distribution

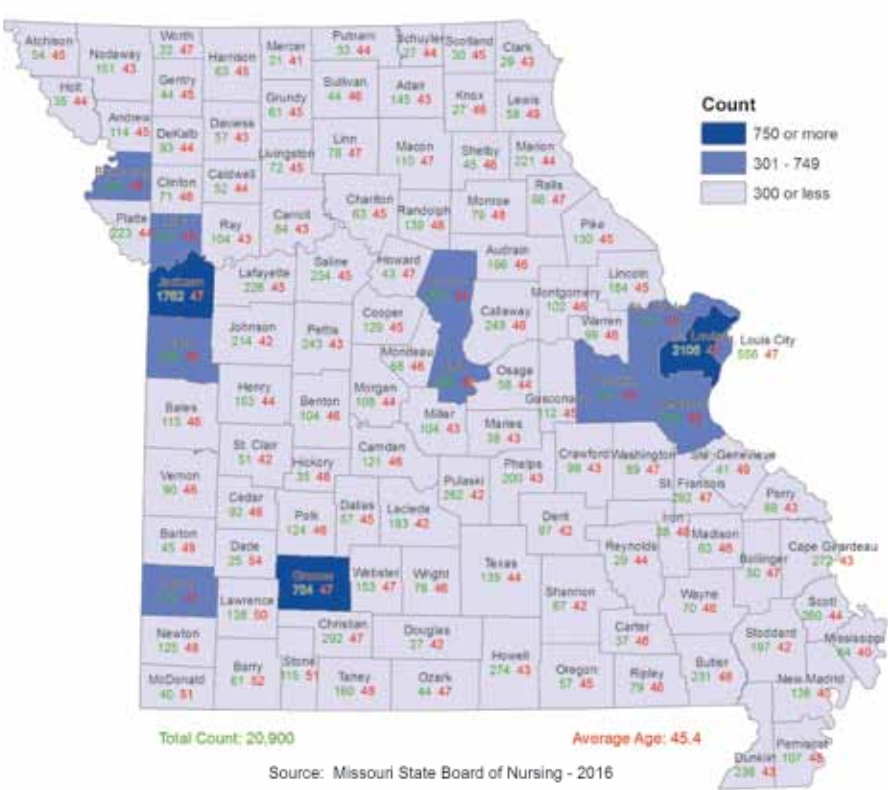


Registered Nurse Age Distribution

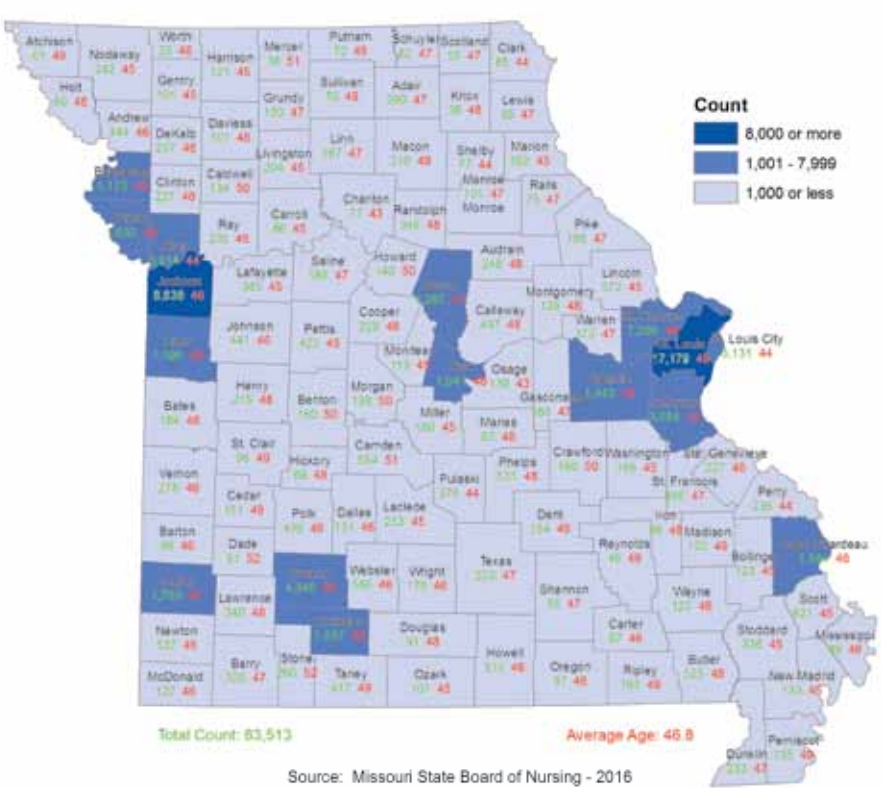


The following three maps depict the average age by county and the number of nurses in each county who had a current Missouri nursing license and Missouri primary address as of July 1, 2016. The average age on the following maps is the average age of nurses that reported Missouri primary residence.

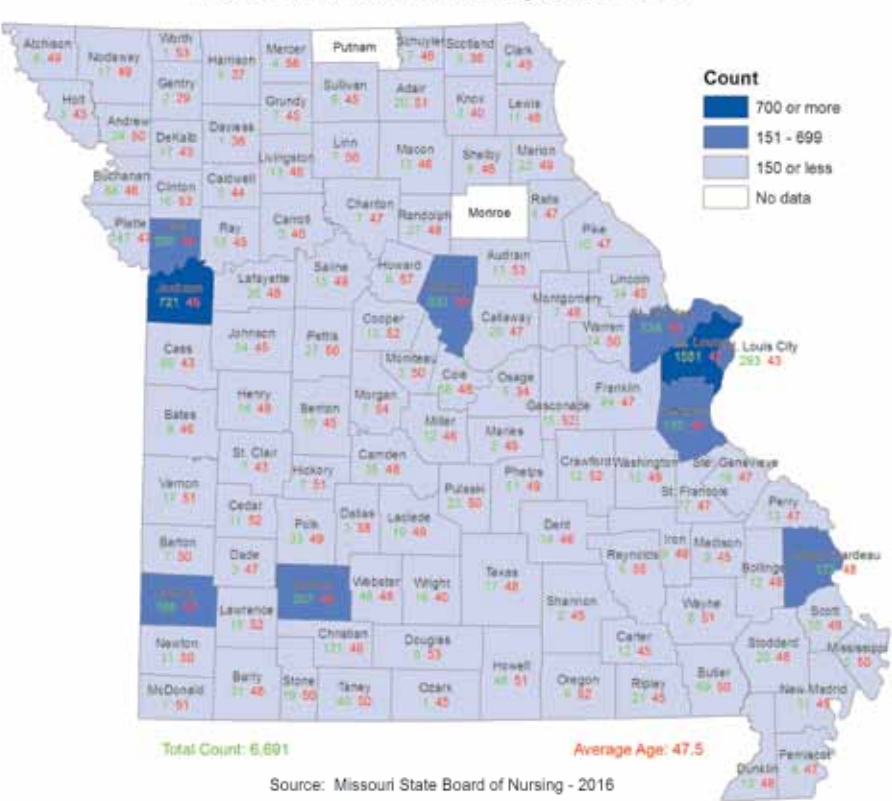
Missouri Licensed Practical Nurses



Missouri Registered Nurses



Missouri Advanced Practice Registered Nurses



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Education Report

The State of Nursing Education in Missouri—2014

Authored by Ryan House, RN, MSN
– Education Compliance Officer

Missouri State Board of Nursing Education Committee Members:

- Roxanne McDaniel, PhD, RN(Chair)
- Lisa Green, PhD, RN
- Mariea Snell, DNP, MSN, BSN, RN, FNP-BC
- Anne Heyen, DNP, RN, CNE

As part of the process for Missouri pre-licensure nursing programs to maintain approval by the Missouri State Board of Nursing, such programs are required to complete an annual program report. While requirements for annual reporting have not significantly changed over the past few years, processes have been transformed to greatly facilitate collection of valuable program data. While programs have been required to report their program statistics on an annual basis for many years, processes have changed over time. With the beginning of calendar year 2015 annual reporting, all approved Missouri pre-licensure nursing programs are now required to report their annual data by the first day of June of the following year. Data collection is streamlined and reporting of data is facilitated.

While 2015 annual report data is currently under compilation and will be available very soon, 2014 annual reporting data reveals the following:

For 2014, 104 nursing programs provided vital information on the current state of pre-licensure nursing education in Missouri. In 2014, 24 bachelor degree programs, one diploma program, 36 associate degree programs and 43 practical nursing programs reported their data.

Throughout the year 2014, 5277 students were reported to have graduated from the four levels of pre-licensure nursing education. Of that number, 2458 (89.33% retention rate) were (pre-licensure) bachelor degree students; 82 students (96% retention rate) were diploma program graduates; 1568 (74.9% retention rate) students were associate degree program graduates; 1169 (77.55% retention rate) students graduated from a practical nursing program. All students combined, that is a state-wide pre-licensure program retention rate of 82.13%.

Combined data indicates that 6564 students began nursing school in 2014. Of that group, 2925 students (44.5%) enrolled in bachelor programs, 100 students (1.5%) began the diploma program, 2012 students (31%) started their nursing studies at ADN programs, and 1527 students (23%) started practical nursing courses.

An additional 3169 applicants had been deemed eligible for admission, but could not be accepted due to resource constraints (faculty shortages and limited clinical placements). Missouri bachelor degree programs turned away 1559 eligible applicants, the diploma program turned away 22 applicants, associate degree programs turned away 1283 applicants and practical nursing programs turned away 305 applicants. Some duplication in numbers is projected since many applicants can attempt admission into multiple programs.

Data indicates that in 2014 there were 918 full-time faculty (filled positions) teaching in pre-licensure nursing programs. An additional 163 part-time faculty and 686 nurses within an (clinical) adjunct pool provided instruction in Missouri pre-licensure nursing programs. That is 1767 nurse educators advancing the profession of nursing for Missouri!

Retirement and unfilled positions are continued problems for many programs. Retirement is approaching for many nurse educators. In 2014, data indicates that 156 (17%) of current full-time nurse educators are planning to retire by 2019. With nearly 1/5 of the nurse educators nearing retirement, the importance of quality faculty mentoring is reinforced for both the new to education/teaching, and the “new to the position” (administrators/promotions) members of nurse education.

Not only is retirement an issue affecting enrollment and faculty numbers, unfilled faculty positions are also quite significant. Of the 967 full-time faculty positions in pre-licensure programs, 5% are reported as unfilled (918 filled, plus 5%). Data suggests that 231 more faculty members in addition to the unfilled positions would be needed to accept all qualified applicants, should other constraints to program expansion and growth be resolved. Shortage in clinical placements, especially opportunities for student assignments to clinical preceptors continues to be a major barrier to program expansions.

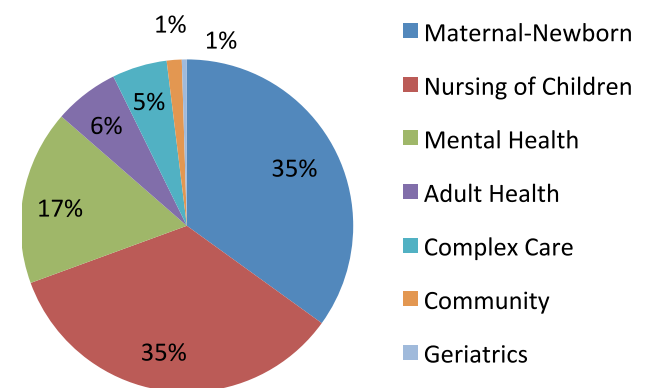
The majority of pre-licensure nursing faculty, 64% of nurse educators, are reported to have achieved a master's degree. 17% of nurse educators are doctorally prepared, and 19% of nurse educators have a bachelor or associate degree in nursing. The majority of the BSN-prepared nurse educators are seen in practical nursing programs. If a nurse has not achieved the required degree, he/she may be contingently approved to instruct. Contingent approval is based on completion of the required degree within a prescribed time frame, should all other requirements for approval be met. For example, a nurse is required to have a graduate degree in nursing to teach in a bachelor degree program. If the nurse has a bachelor degree, he/she may teach if certain criteria are met.

Simulation use is reported at all levels of pre-licensure nursing education, with the highest ratio of simulation-based clinical time indicated in associate degree nursing programs. Simulation at approximately 11.3% of clinical hours is reported for associate degree programs. Percentage of clinical hours for bachelor degree programs is reported at 10.63% and at 8.17% of clinical hours for practical nursing programs. Keep in mind that clinical contact hours may be greater in some degree programs, but this data is based on percentage of clinical hours. A glance into 2015 annual report data suggests that percentage of clinical simulation will be even higher in 2015!

Of the programs that utilize observational experiences, practical nursing programs have the most, with associate degree nursing programs having the lowest percentage of clinical hours of observation. Data indicates a wide range of observational experiences. The minimum standards limit a program to 20% observation of all clinical hours. One may project to see a decrease in observation, especially as utilization of simulation experiences increases.

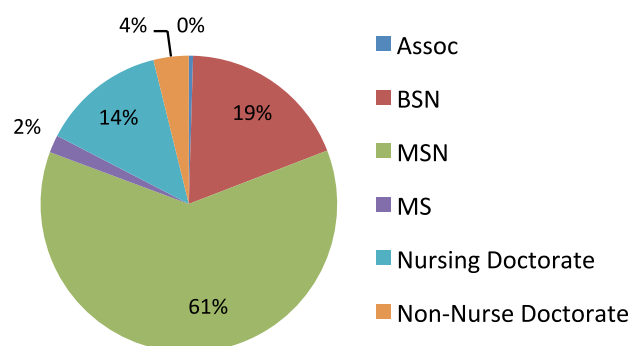
Data continues to suggest that clinical placements are often difficult to attain, especially at sites that offer acute care maternal-newborn and nursing of children experiences. Up to 80% of programs, depending on educational program level, reported difficulty in obtaining one or both of those specialties. In addition, 17% of programs report shortages in placement opportunities in mental health nursing settings.

Overall Needed Clinical Sites all levels of pre-licensure



As the demand for nurses continues to grow, the demand for nurse educators also grows. As the reader can see, there are a large number of applicants that nursing programs are unable to accept due to a variety of barriers, with limitations in faculty and clinical resources at the top of the list. With growth of the nurse educator pool, we could see expansion of the nursing programs to help offset the high nursing demand. This is an excellent opportunity for nurses to explore career paths in nursing education, examine potential teaching capabilities and make plans to share their expertise. Ample opportunities exist to serve as an instructor or clinical adjunct faculty, which provides an amazing opportunity to impact the next generation of nurses and to give back to the profession of nursing.

Level of Faculty Education



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Moments with Marcus

Knowing What It's Like

As I'm writing this, it's early September, football season is just getting started, we're about 60 days from the election (thank God it's almost over) and, most importantly, school is back in session. It's been a few years since I've been a student. Even so, I always get excited at back to school time. My inner nerd reveals itself!

About five years ago, I had the opportunity to speak at a high school near St. Louis. Afterward I became Facebook friends with one of the students, Kelsay. Kelsay has gone on to become a student nurse at my alma mater, Missouri State. Here's a story from one of her recent Social Media posts, in her own words:



Marcus Engel

The most kind and caring thing happened to me yesterday! When I went grocery shopping last night, this extremely generous woman bought my groceries!!! I stared at her while she swiped her card and she said, "I'm a nurse, I know how hard going to school is." I never imagined getting support from a complete stranger! I was so shocked! I couldn't believe it. I just kept thanking her for the kind deed she did for me. She really helped me out, I can't get over that it happened. I can't wait to be able to do this for a college student one day! I don't even know her name, but thank you to the woman that bought my groceries you are such a incredibly generous person!

Now get this...this nurse philanthropist did not even know Kelsay is a student nurse. Kelsay was wearing a Missouri State shirt and talking to a friend about having to adjust her budget, but nothing about her studying nursing. This nurse philanthropist simply saw a young college student struggling financially... and she did what nurses do: provide compassion and help for those who are suffering.

I find generosity to be one of the most valuable human traits. Don't you? I also find that, almost without fail, nurses are, at their core, quite generous. Nurses are generous mainly of themselves. By that, I mean they give of themselves. They open themselves to the suffering of other human beings, spend long hours providing care in a professional role and, many times, go home and provide more caregiving without financial compensation. Just opening oneself to the pain of other human beings, being a witness to suffering, acknowledging AND then jumping in head first to provide compassionate care is truly one of the most generous things we human beings can do. And nurses... it's not only your profession – it's simply who you are. Your kindness extends beyond the patient to encapsulate all of humanity...and people like me (and Kelsay) are grateful.



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November 16-18, 2016

March 1-3, 2017

June 7-9, 2017

September 6-8, 2017

November 15-17, 2017

Meeting locations may vary. For current information please view notices on our website at <http://pr.mo.gov> or call the board office.

If you are planning on attending any of the meetings listed above, notification of special needs should be forwarded to the Missouri State Board of Nursing, PO Box 656, Jefferson City, MO 65102 or by calling 573-751-0681 to ensure available accommodations. The text telephone for the hearing impaired is 800-735-2966.

Note: Committee Meeting Notices are posted on our web site at <http://pr.mo.gov>



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Disciplinary Actions**

Pursuant to Section 335.066.2 RSMo, the Board “may cause a complaint to be filed with the Administrative Hearing Commission as provided by chapter 621, RSMo, against any holder of any certificate of registration or authority, permit, or license required by sections 335.011 to 335.096 or any person who has failed to renew or has surrendered his certificate of registration or authority, permit or license” for violation of Chapter 335, the Nursing Practice Act.

**Please be advised that more than one licensee may have the same name. Therefore, in order to verify a licensee’s identity, please check the license number. Every discipline case is different. Each case is considered separately by the Board. Every case contains factors, too numerous to list here, that can positively or negatively affect the outcome of the case. The brief facts listed here are for information only. The results in any one case should not be viewed as Board policy and do not bind the Board in future cases.

The Board of Nursing is requesting contact from the following individuals:

Jamey Biggs – RN 2003024481
Beth Hunciker – RN 2015009423

If anyone has knowledge of their whereabouts, please contact Kristi at 573-751-0082 or send an email to nursing@pr.mo.gov

CENSURE

Wills, Julie Mae
 Hillsboro, MO

Licensed Practical Nurse 2010031594

Licensee practiced nursing in Missouri without a license from June 1, 2014, to September 9, 2015.
 Censure 06/15/2016

CENSURE continued...

Riney, Marsha B
 Palmyra, MO

Registered Nurse 088286

Licensee was employed by a hospice company. In February 2014, Licensee was in the home of a hospice patient who passed away. After consoling the family, Licensee took the patient’s medications with her when she left the home.

Censure 08/10/2016

Miller, Hannah M
 Troy, MO

Registered Nurse 120775

Licensee practiced nursing in Missouri without a license from May 1, 2015, to May 10, 2016.

Censure 08/10/2016

Whitaker, Michelle M
 Warrenton, MO

Registered Nurse 116708

Respondent failed to call in to NTS on three (3) days that were not excused. The blood sample Respondent provided on February 22, 2016, tested positive for PEth. Respondent admitted to drinking alcohol on Valentine’s Day.

Censure 07/25/2016

Christopher, Felisa Jeanette
 Troy, KS

Licensed Practical Nurse 2010003718

The inmate admitted to the correctional facility investigator that he and Licensee had kissed and engaged in physical contact. On or about December 4, 2014, Licensee was questioned by the correctional facility investigator about her relationship with the inmate. Licensee admitted to kissing the inmate multiple times, but denied additional physical contact. Additionally, the inmate and Licensee exchanged multiple written letters of an intimate nature.

Censure 06/01/2016

Johnsen, James L
 Springfield, MO

Registered Nurse 151880

CENSURE continued...

On October 15, 1999, Licensee pled guilty to the offense of DWI - Alcohol. On October 25, 2000, Licensee pled guilty to the offense of DWI - Alcohol. Licensee failed to disclose the guilty pleas on prior Missouri RN renewals until his renewal application in 2015. On February 9, 2013, the Oklahoma Board of Nursing reprimanded Licensee’s Oklahoma nursing license due to failing to disclose the guilty pleas. On October 18, 2013, the Arkansas Board of Nursing denied Licensee’s application for licensure due to failing to disclose the DWI guilty pleas and failing to respond to contact from the Arkansas Board or cooperate with its investigation. On December 10, 2014, the Kansas Board of Nursing suspended Licensee’s Kansas nursing license with a stay, provided Licensee complete specific requirements of the Board.
 Censure 08/10/2016

Airrington, Christy Dawn
 Chilhowee, MO

Licensed Practical Nurse 2014024021

Respondent was required to submit a chemical dependency evaluation to the Board within eight weeks of the effective date of the Agreement and follow any recommendations of the evaluator. The chemical dependency evaluation submitted on Respondent’s behalf on December 8, 2015, stated that Respondent needed to attend four individual counseling sessions over the following four weeks. Because further treatment was recommended, Respondent was required to submit updated evaluations from the evaluator for proof of treatment on a quarterly basis to show that she was complying with the evaluator’s recommendation making the first quarterly due date on January 6, 2016. The Board did not receive an updated evaluation by the due date of January 6, 2016.

Censure 07/18/2016

Gulley, Alison Ann
 Kansas City, MO

Registered Nurse 2007001235

Licensee practiced nursing in Missouri without a license from May 1, 2015, to May 16, 2016.

Censure 07/12/2016

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CENSURE continued...

Conrad, Heather L
Cape Girardeau, MO
Licensed Practical Nurse 2001008595
On August 5, 2015, a correctional center investigator discovered that Licensee had been engaging in telephone conversations with Offender SG. When questioned, Licensee admitted to exchanging telephone calls with Offender SG. Licensee also acknowledged to the Board investigator that her communications with Offender SG had been romantic in nature.
Censure 08/10/2016

O'Bryan, Alex Wayne
Joplin, MO
Registered Nurse 2007001109
On January 23, 2015, after Licensee worked a full night shift discrepancies were noted between what was pulled from the Pyxis and what was administered by him to patients. Licensee documented removing 3 Percocet for patient WB on January 23, 2015, but only documented administering 1 Percocet to WB. The other 2 Percocet were not shown as administered or wasted. On the same day and for the same patient, he again removed 3 Percocet, documented administering all 3 at 2007, but the physician order for WB was only for one Percocet every hour. He also removed another 1 Percocet on the same day and for the same patient at 2056, but did not document administering it or wasting it. Licensee documented removing three (3) 5 mg tablets of Oxycodone for patient SW on January 23, 2015 at 2123, and wasted 2 of them, but did not document administering or wasting the other Oxycodone. He also documented a return on that same day for that same patient at 2121, 1 mg of Percocet back to the Pyxis, but there was no record of licensee ever removing Percocet for SW on that shift prior to that return. Licensee admitted that when giving the morning report at the hospital on January 24, 2015, he was "disorganized during report."
Censure 08/18/2016

Kendrick, Jimmie W
Columbia, MO
Licensed Practical Nurse 2000165224
On April 9, 2012, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol, and Ethyl Sulfate, another metabolite of alcohol. Respondent denied drinking alcohol, but reported to Dr. Greg Elam that he had been cleaning a lawnmower and leaf blower the previous weekend and had possibly inhaled some ethanol vapors from the gasoline. On February 5, 2016, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol, and Ethyl Sulfate (EtS), another metabolite of alcohol.
Censure 07/25/2016

Freeman, Clarice E
Lincoln, NE
Registered Nurse 114928
On or about May 27, 2015, Licensee failed to issue prescriptions to two (2) patients upon discharge; one (1) prescription for infection prevention and one (1) prescription for pain. Licensee failed to notify hospital management or

CENSURE continued...

the patients' physicians of her error. Licensee attempted to reach the patients by phone for two (2) days, and ultimately mailed the prescriptions to the patients on the third day. On June 4, 2015, Licensee clocked out and left the hospital without reporting off on two (2) of her patients.
Censure 07/26/2016

Buster, Rachel Leeann
Hannibal, MO
Registered Nurse 2014020588
On March 20, 2015 at approximately 4:30 a.m., Inmate BS was admitted to the center's TCU where Licensee was the nurse on duty. Inmate BS had been previously assessed and interviewed by another nurse, LPN Tate. Inmate BS's complaints at the time were back and shoulder pain. Licensee interviewed Inmate BS, and then performed a physical exam which showed some difficulty raising his right arm. Inmate BS advised Licensee that was not a new symptom. Based on her interview and physical exam of this inmate, Licensee did not assess any new symptoms or change in condition that had not already been brought to the attention of the medical personnel at the prison's infirmary in the days leading to March 20, 2015. A corrections officer called Licensee back to the inmate's cell at approximately 5:26 a.m. advising Licensee that the inmate did not look well. Licensee immediately went to the inmate's cell and found him to be unresponsive with no heart or lung sounds. She also noted he had a very gray cast to his skin, and that his lips were deep blue in color. Licensee assessed the patient to be long expired at this point, and determined that any attempts at resuscitation would be inhumane. Therefore, Licensee did not initiate CPR on Inmate BS. Inmate BS was pronounced dead by the on-call physician at 5:35 a.m. on March 20, 2015.
Censure 08/23/2016

PROBATION

Pipes, Kayla Diann
Sparta, MO
Licensed Practical Nurse 2015004231
From March 17, 2015 through January 28, 2016, Respondent failed to call in to NTS on three days. Further, on October 5, 2015; October 23, 2015; November 9, 2015; December 4, 2015; and, December 21, 2015, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample on each of those dates. On September 29, 2015, Respondent submitted a sample for testing; however, the test was cancelled due to Respondent forging the chain of custody document. On October 19, 2015, Respondent informed Board staff that she had relapsed and was entering an inpatient rehabilitation facility. Respondent

PROBATION continued...

relapsed by using heroin in the middle of September 2015. The Board did not receive an updated chemical dependency evaluation submitted on Respondent's behalf by the quarterly due date of November 10, 2015.
Probation 07/06/2016 to 07/06/2021

Conwell, Patricia J
Ozark, MO
Registered Nurse 089329
On March 16, 2015, Licensee pled guilty to the class C felony of Possession of a Controlled Substance Except 35 Grams or Less of Marijuana in violation of §195.202 RSMo, as well as two (2) counts of the class A misdemeanor of Unlawful Use of Drug Paraphernalia in violation of §195.233 RSMo, in the Circuit Court of Bates County, Missouri, in case number 14BS-CR00665-01. Licensee admitted to abusing methamphetamines, marijuana and alcohol. She last used methamphetamine and/or marijuana on March 4, 2015 and last consumed alcohol in January 2015 Licensee stated on her renewal application that she is receiving treatment and attends regular support group meetings.
Probation 06/07/2016 to 06/07/2021

Braymer, Donna J
Laclede, MO
Registered Nurse 133601
On or about June 26, 2015, Licensee documented a new patient nurse visit in the chart and eNatal record. Licensee contacted the patient via telephone and asked her questions, then entered it into the chart as if she had performed an in-office patient visit. Licensee did not physically assess the patient in person. Licensee's record entry constituted falsely documenting her findings.
Probation 07/27/2016 to 07/27/2017

Huepper, Kelly Jaquith
San Diego, CA
Registered Nurse 2013030816
On July 16, 2015, it was discovered that the tops of six vials of Fentanyl had been tampered with. When questioned, Licensee admitted to removing the Fentanyl from the vials and replacing it with saline. Licensee was instructed to take time off and seek treatment. Administrators changed the building lock codes so that Licensee could not enter the buildings and access narcotics. Licensee attended outpatient treatment during the week of July 20, 2015. On July 28, 2015, Licensee was scheduled to be admitted to an inpatient treatment facility. On July 28, 2015, Licensee contacted a nurse asking for the code to access the building. At approximately

PROBATION continued on page 10



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PROBATION continued from page 9

2:00 a.m. on July 28, 2015, Licensee entered the facility and modified the narcotic log sheets in order for it to appear that there was less Fentanyl in stock. Two vials of Fentanyl were found to be missing. Licensee admitted to the Board's investigator that she had started diverting medication in late August or early September 2014. Licensee further admitted that she had also diverted Morphine, Demerol, Percocet, and Vicodin.
Probation 06/28/2016 to 06/28/2021

Beasley, Lynda M
Sedalia, MO
Licensed Practical Nurse 038612

On or about May 18, 2016, Licensee learned her license had expired in May 2012. Licensee practiced nursing in Missouri without a license from June 1, 2012, through May 18, 2016.
Probation 08/24/2016 to 08/24/2017

Holliday, Colette Michelle
Ellenwood, GA
Licensed Practical Nurse 2012030684

Respondent began working on September 30, 2013, and resigned her position on December 7, 2013. Both Respondent and the inmate admitted that they began a relationship in November 2013 while Respondent was employed as a nurse at the correctional center.
Probation 07/18/2016 to 07/18/2019

Smith, Lisa A
Malden, MO
Licensed Practical Nurse 054821
On August 23, 2011, Licensee pled guilty to the class B misdemeanor of DWI - Combined Alcohol/Drug Intoxication. On January 11, 2012, Licensee pled guilty to the class C felony of Possession of Controlled Substance Except 35 Grams or Less of Marijuana. Licensee

PROBATION continued...

possessed methamphetamine. Licensee submitted, with her application, a Discharge Summary which indicates that Licensee was admitted to a drug/alcohol treatment program on September 30, 2011, and discharged on October 13, 2011. In the Discharge Summary, Licensee was diagnosed with 304.40 Amphetamine Dependence and 304.20 Cocaine Dependence. The discharge summary reflected a sixteen year history of cocaine abuse and a fifteen year history of methamphetamine abuse. Licensee underwent aftercare through a church program and reports her date of sobriety is August 13, 2011, but also reported that she last used drugs and alcohol on August 13, 2011.
Probation 08/24/2016 to 08/24/2021

Posey, Erica Dawn
Jackson, MO
Registered Nurse 2006018359

Count I
On or about August 29, 2015, Licensee's co-worker found Licensee asleep in an empty patient room while on duty. When hospital Human Resources reviewed the security camera video, Licensee was seen entering the empty patient room with a blanket at approximately 00:40 and was not seen again until the co-worker woke her up at approximately 02:00.
Count II
On January 3, 2016, while verifying Licensee's license for the extension of an assignment, agency staff discovered that Licensee's license had been suspended during her assignment. Licensee's license was suspended pursuant to §324.010 RSMo from September 30, 2015 through November 12, 2015. Licensee worked as a registered nurse during the time her license was suspended.
Probation 07/27/2016 to 07/27/2017

Ashbrook, Erin Daile
Cameron, MO
Registered Nurse 2000162015
On June 10, 2015, Respondent pled guilty to the class D felony of DWI - Alcohol - Persistent Offender in violation of §577.010 RSMo, and Operating a Vehicle on a Highway Without a Valid License in violation of §302.020 RSMo, in the Circuit Court of Daviess County, Missouri, in case

PROBATION continued...

number 14DV-0CR00256-01.
Probation 07/19/2016 to 07/19/2019

Rudolph, Tiffany Anne
Eldon, MO
Registered Nurse 2007026725

On October 6, 2014, Respondent pled guilty to the crime of theft/stealing, in violation of §570.030 RSMo, in the Circuit Court of Camden County, Missouri, in case number 14CM-CR01322. On May 6, 2015, Respondent admitted that she violated the terms of her prior probation by committing the offense of theft/stealing, in violation of §570.030 RSMo, in the Circuit Court of Camden County, Missouri, in case number 14CM-CR01322.
Probation 07/19/2016 to 07/19/2018

Bowman, Russell S
Independence, MO
Registered Nurse 120634

On November 17, 2015; December 16, 2015; January 12, 2016; January 25, 2016; and April 11, 2016, Respondent called NTS and was advised that he had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample on the six (6) days.
Probation 07/25/2016 to 07/25/2019

Brewer, Sarah Joanna
Independence, MO
Licensed Practical Nurse 2014017945

The Missouri State Board of Nursing received information from the Illinois State Board of Nursing that the nursing license of Respondent was voluntarily surrendered in Illinois due to a final disciplinary action being taken by the Illinois State Board of Nursing in an Order dated April 20, 2015. In the Order, the Illinois Board of Nursing alleged that in July 2014, Respondent diverted controlled substances.
Probation 07/25/2016 to 08/21/2016

Benfield, Marilyn Rose
Bonne Terre, MO
Registered Nurse 2000158988
On April 26, 2015, it was discovered that a 21.5 ml jar of Morphine rub was missing from the medication room.



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PROBATION continued...

Administrators interviewed and drug tested all employees. It was determined that Licensee failed to lock the narcotics box in the medication room. It was also determined that Licensee propped open the door to the medication room during the timeframe where the Morphine went missing. On or about April 27, 2015, Licensee's drug screen came back positive for marijuana.
Probation 07/13/2016 to 07/13/2019

Wilson, Rebecca Lynn
Eufaula, OK
Registered Nurse 2005010089
On March 17, 2016, the Nevada State Board of Nursing and Respondent entered into an Agreement for Probation due to Respondent testing positive for alcohol while on duty at a hospital. In the Agreement, Respondent's Nevada nursing license was placed on probation for two (2) years under specified terms and conditions. The Agreement became effective on March 24, 2016.
Probation 07/25/2016 to 07/25/2018

Gabris, Pamela A
Ballwin, MO
Registered Nurse 062195
Licensee represented herself as being a licensed registered nurse in Missouri when she was not licensed as such from May 1, 2011, through June 7, 2016.
Probation 08/25/2016 to 08/25/2018

Hiser, Marissa Kay
Springfield, MO
Licensed Practical Nurse 2004007932
On January 30, 2015, Respondent was selected for a random drug screen. On February 8, 2015, Respondent's drug screen was confirmed positive for amphetamines and methamphetamine.
Probation 07/18/2016 to 07/18/2021

Rawlings, Rachelle Nora
Saint Joseph, MO
Licensed Practical Nurse 2003018587
From July 20, 2015, until the filing of the Complaint on April 27, 2016, Respondent failed to call in to NTS on six (6) days. In addition, on September 29, 2015, Respondent reported to a lab and submitted the required sample which showed a low creatinine reading. On February 3, 2016, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol.
Probation 07/25/2016 to 07/25/2018

Walsh, Charline
Arnold, MO
Licensed Practical Nurse 038970
In accordance with the terms of the Agreement, Respondent was required to obtain continuing education hours covering the following categories: Righting a Wrong -Ethics and Professionalism in Nursing; Professional Accountability and Legal Liability for Nurses; Missouri Nursing Practice

PROBATION continued...

Act; Disciplinary Actions: What Every Nurse Should Know; and, Physical Assessment (Adult), and have the certificate of completion for all hours submitted to the Board by December 25, 2015. On December 29, 2015, the Board's Director of Compliance telephoned Respondent and informed her that the Board had not received proof of completion of Physical Assessment (Adult). The Board received proof of completion of the other required courses on or about December 19, 2015. As of the Probation Violation Complaint filing on February 3, 2016, the Board still had not received proof of completion of Physical Assessment (Adult).
Probation 07/06/2016 to 07/06/2017

Flynn, Terri L
Kansas City, MO
Registered Nurse 143606
On March 1, 2012, Respondent took and possessed a coworker's personal property - a bottle containing prescription Vicoprofen - without her knowledge or consent, as retribution for personal animosity between the two. On March 7, 2012, Respondent provided a urine sample at a collection site. Respondent tested positive for THC or marijuana because she had used the drug marijuana.
Probation 07/18/2016 to 07/18/2021

McCarron, Susan R
Farmington, MO
Licensed Practical Nurse 038921
On or about November 26, 2014, Respondent was observed at the hospital using a syringe on herself by a co-worker. When Respondent was questioned, she admitted to engaging in self-mutilating behavior. On November 26, 2014, Respondent agreed to submit a for-cause drug screen. Respondent's drug screen was positive for Amphetamines and Opiates.
Probation 07/18/2016 to 07/18/2021

Bockelman, Joel Allen
Jackson, MO
Registered Nurse 2014004357
On or about December 29, 2014, a Charges and Credits report was run and revealed suspicious narcotics transactions by Licensee. A further audit of Licensee's Pyxis use was run and several discrepancies were found in Licensee's administration and waste of Dilaudid. Licensee was asked to submit to a for-cause drug screen on December 31, 2014. Licensee consented to the drug screen, but did not supply a sample of sufficient quantity for testing. When questioned by hospital administration regarding the narcotic discrepancies, Licensee admitted to taking medication from the hospital Pyxis for his personal use. At the time of the interview, Licensee had two (2) vials of Dilaudid in his shirt pocket which he had removed from the Pyxis for his personal use. Licensee had two (2) vials of Dilaudid in his personal duffel bag. Licensee further admitted that in some situations, he wrote orders for Dilaudid for patients when there had been no physician

PROBATION continued...

order for the Dilaudid. Licensee would then take that Dilaudid for his personal use.
Probation 08/12/2016 to 08/12/2019

Lines, Julie Michelle
Butler, MO
Licensed Practical Nurse 2007024012
On October 18, 2013, Respondent called a prescription of Norco 7.5mg/325mg quantity of 30 in to a pharmacy, under the orders of Dr. B, purportedly for her husband J. L. The pharmacy technician that received the phone order called the clinic to verify the prescription. Respondent called the pharmacy technician back and told her to cancel or disregard the prescription. On October 23, 2013, Respondent called Pharmacy and ordered a prescription for 30 Norco 7.5mg/325mg to be filled under the orders of R S, Family Nurse Practitioner, purportedly for her husband, J. L. The prescription was filled and Respondent picked up the prescription wearing her scrubs and Hospital name tag. Dr. B did not prescribe, authorize or order hydrocodone for J.L. Ms. S did not prescribe, authorize or order hydrocodone for J.L. There was no documentation in J.L.'s chart on October 23, 2013. On October 28, 2013, a review of J.L.'s chart was done. Respondent documented in J.L.'s chart on October 25, 2013, at 1735 and backdated the entry to October 23, 2013.
Probation 07/18/2016 to 07/18/2021

Flowers, Faith E
Auxvasse, MO
Licensed Practical Nurse 051102
On July 24, 2015, Respondent pled guilty to the class C felony of Theft/Stealing (Value of Property or Services is \$500 or More But Less than \$25,000)
Probation 07/18/2016 to 07/18/2018

Neville, William Brian
Joplin, MO
Registered Nurse 2012006435
On or about February 16, 2015, the hospital pharmacy ran an audit report showing irregularities in Licensee's narcotic administration from January 5, 2015, through February 16, 2015. The following irregularities were discovered:
a. On January 5, 2015, Licensee withdrew 2 mg of hydromorphone for patient DB at 3:36 PM. Licensee wasted the 2 mg of hydromorphone at 3:42 PM. Licensee had no reason to withdraw the hydromorphone at 3:36 PM.
b. On January 8, 2015, Licensee withdrew 10 mg of morphine for patient MS. Patient MS did not have an order for morphine. Licensee did not document the administration, waste or return of the morphine.
c. On January 8, 2015, Licensee withdrew 10 mg of morphine for patient TT. Licensee did not document administration, waste or return of the morphine.
d. On January 15, 2015, Licensee withdrew 2 mg of hydromorphone for patient SM at 12:11 PM. Licensee

PROBATION continued on page 12



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PROBATION continued from page 11

- wasted 2 mg of hydromorphone at 12:43 PM. Licensee had no reason to withdraw the hydromorphone at 12:11 PM.
- e. On January 16, 2015, Licensee withdrew 10 mg of morphine for patient JI at 11:47 AM. Licensee wasted 5 mg of morphine immediately after withdrawing it, and wasted the remaining 5 mg at 12:14 PM. Licensee had no reason to withdraw the morphine at 11:47 AM.
- f. On January 16, 2015, Licensee withdrew 2 mg of hydromorphone for patient EP at 10:32 AM. Licensee wasted 1.5 mg of hydromorphone immediately after withdrawing it, and wasted the remaining 0.5 mg at 10:36 AM. Patient EP had received the dose of hydromorphone at 10:22 AM, so there was no reason for Licensee to withdraw the hydromorphone at 10:36 AM.
- g. On January 19, 2015, Licensee withdrew 2 mg of morphine for patient ML at 4:33 PM. Licensee wasted 1.5 mg of morphine immediately after withdrawing it, and wasted 0.5 mg at 4:40 PM. Licensee had no reason to withdraw the morphine at 4:33 PM.
- h. On January 24, 2015, Licensee withdrew 2 mg of hydromorphone for patient SB at 10:01 AM. Licensee wasted 1.5 mg of hydromorphone immediately after withdrawing it, and wasted 0.5 mg at 10:10 AM. Licensee had no reason to withdraw the hydromorphone at 10:01 AM.
- i. On January 24, 2015, Licensee withdrew 100 mg of fentanyl for patient RC at 7:25 AM. Licensee immediately wasted 50 mg, and wasted the remaining 50 mg of fentanyl at 7:41 AM. The fentanyl had already been administered by nurse JD at 7:09 AM, and there was no reason for Licensee to withdraw fentanyl at 7:25 AM.
- j. On January 24, 2015, Licensee withdrew 10 mg of morphine for patient RC at 8:17 AM. Patient RC was discharged at 8:17 AM. Licensee wasted 10 mg of morphine at 8:35 AM. There was no reason for Licensee to withdraw morphine at 8:17 AM.
- k. On January 25, 2015, Licensee withdrew 2 mg of hydromorphone for patient JF at 4:27 PM. Patient JF was discharged at 4:30 PM. Licensee wasted 2 mg of hydromorphone at 5:00 PM. There was no reason for Licensee to withdraw the hydromorphone at 4:27 PM.
- l. On January 27, 2015, patient FM had a one-time order for 4 mg of morphine. Licensee withdrew 10 mg of morphine at 10:07 AM, immediately wasted 6 mg, and administered 4 mg to patient FM at 10:09 AM. Licensee withdrew 10 mg of morphine at 1:31 PM, immediately wasted 6 mg, and documented administration of 4 mg at 1:37 PM with no order. At 2:26 PM, Licensee withdrew 10 mg of morphine with no order, immediately wasted 6 mg, and wasted 4 mg at 2:47 PM.
- m. On February 2, 2015, Licensee withdrew 10 mg of morphine for patient MP at 9:01 AM. Licensee failed to document administration, waste or return of the 10 mg of morphine. Patient MP was discharged at 9:02 AM.
- n. On February 14, 2015, patient RC had an order for 5 mg of morphine at 7:47 AM, 10:00 AM, and 1:33 PM. The morphine was documented as given by Nurse AB at 7:47 AM, 10:01 AM, and 3:41 PM. Licensee withdrew 10 mg of morphine at 2:05 PM, immediately wasted 5 mg, and wasted the remaining 5 mg at 3:15 PM.

PROBATION continued...

- o. On February 14, 2015, Licensee withdrew 2 ml of fentanyl at 10:02 AM for patient TK. Licensee failed to document administration, waste or return of the 2 ml of fentanyl.
- p. On February 15, 2015, patient SP was given a one-time order for 0.5 ml of morphine, which was documented as given by Nurse LP at 3:16 PM. Licensee withdrew 10 mg of morphine for patient SP at 4:31 PM and wasted 10 mg at 4:59 PM. There was no reason for Licensee to withdraw the morphine at 4:31 PM.
- q. On February 15, 2015, patient MT was given a one-time order for 0.25 ml of hydromorphone, which was documented as given by nurse LP at 1:47 PM. Licensee pulled 2 mg of hydromorphone for patient MT at 3:10 PM and wasted 2 mg at 4:26 PM. Licensee had no reason to withdraw the hydromorphone at 3:10 PM.
- r. On February 16, 2015, Licensee withdrew 2 mg of hydromorphone for patient BR at 1:47 PM. Licensee wasted 2 mg of hydromorphone for patient BR at 3:58 PM. Licensee had no reason to withdraw the hydromorphone at 1:47 PM.
- s. On February 16, 2015, patient WR was given an order for 0.5 ml of hydromorphone, which was documented as given by Nurse AA at 4:01 PM. Licensee withdrew 2 mg of hydromorphone for patient WR at 4:27 PM and wasted 2 mg of hydromorphone at 4:28 PM. Licensee had no reason to withdraw the hydromorphone at 4:27 PM.
- Probation 08/09/2016 to 08/09/2019

Kinsley, Bobbie J
Harrisonville, MO

Registered Nurse 2016018554

On February 3, 2016, Licensee signed an Agreed Order with the Texas Board of Nursing, which went into effect on March 8, 2016. In the Order, Licensee and the Texas Board stipulated that her license was subject to discipline for the following allegations: On or about January 6, 2014, through February 2, 2014 Licensee diverted Hydrocodone from the facility and patients thereof, in that she admitted to the Employee Wellness Manager that she was taking Hydrocodone from the medication dispensing system for her own personal use. Licensee's last use of hydrocodone in excess of her treating physician's prescriptive authority was February 2, 2014. The Texas Board suspended Licensee's license but stayed the suspension and placed the license on probation for a minimum of three years and until Licensee fulfills specified terms and conditions.

Probation 06/07/2016 to 06/07/2021

Thoenen, Wendy Lea
Columbia, MO

Licensed Practical Nurse 1999136946

Respondent was to submit an employer evaluation from every employer or, if Respondent was unemployed, a statement indicating the periods of unemployment on a quarterly basis. The Board did not receive an employer evaluation or statement of unemployment by the quarterly due date of January 20, 2016. In accordance with the terms of the Agreement, Respondent was required to not violate

PROBATION continued...

the Nurse Practice Act and obey all laws of the State of Missouri. On November 23, 2015, Respondent pled guilty to the class C felony of Possession of a Controlled Substance, in violation of §195.202 RSMo, in the Circuit Court of Boone County, Missouri. Respondent possessed cocaine rock on July 2, 2015, after the probation on her license went into effect.

Probation 07/19/2016 to 07/19/2021

Alexander, Gayle Wendalyn
Springfield, MO

Registered Nurse 2000146033

On or about November 30, 2006, Applicant was found guilty by a jury of grand theft \$300 or more but less than \$20,000, a third degree felony, in violation of Fla. Stat. Ann §812.014 and insurance fraud \$100 K or more, a first degree felony, in violation of Fla. Stat. Ann. §817.234 in the Circuit Court, Nineteenth Judicial Circuit, in and for Martin County, Florida. Applicant was sentenced to five (5) years in the Department of Corrections on the grand theft conviction and to ten (10) years in the Department of Corrections on the insurance fraud conviction, followed by five (5) years supervised probation. She was ordered to pay \$185,299.64 in restitution. Applicant's probation will continue until March 30, 2020. On April 28, 2011, the Florida State Department of Health issued its Order of Emergency Suspension of License suspending Applicant's Florida nursing license because she had been found guilty of a felony under Chapter 817 of the Florida Statutes. On or about June 3, 2016, the Florida Board of Nursing reinstated Applicant's Florida nursing license.

Probation 08/30/2016 to 03/20/2020

Clay, Diana L
Jefferson City, MO

Registered Nurse 133130

On October 15, 2014, Licensee submitted a sample for a pre-employment drug screen. The sample that Licensee provided was positive for a marijuana metabolite. Licensee admitted to the Board's investigator that she smoked marijuana.

Probation 07/26/2016 to 07/26/2018

RESTRICTED

Smith Burns, Danelia
Clarksville, TN

Registered Nurse 2002009076

Missouri PTP revoked

On November 1, 2010, Respondent was assigned to care for a patient admitted in labor with a 21-week gestation. The patient delivered the fetus on November 1, 2010 at 05:12, and the fetus died at 05:44 on that date. Respondent failed to refer to the hospital policy for handling fetal demise or discuss how to handle the issue with her charge nurse or other nurses working her shift. Respondent did not begin to complete the fetal loss paperwork and did not fill out any information for the demise. Respondent did not document the time of birth of the fetus, and did not

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RESTRICTED continued...

document the extreme measures taken to try and save the life of the fetus or that the fetus was wrapped in warm blankets and handed to the parents. Respondent failed to follow the policy for using the abbreviation “BS” in patients’ records, leading to inaccurate records. She used BS for “bedside” when the hospital uses BS for breath sounds or bowel sounds. On January 14, 2011, Respondent did not document a newborn assessment in the charts of several of her patients. On February 17, 2011, during the night shift, Respondent brought a Vicodin tablet - a controlled substance - to a patient’s room at 20:45 and left it at the bedside without checking patient identifiers or watching the patient ingest the medication. Respondent returned to the patient’s room at 22:30 and asked the patient if she had ingested the medication. The patient stated she had ingested the Vicodin at 20:45. Respondent told the patient she should not have done so until 22:30 even though she had delivered the Vicodin almost two hours earlier. Respondent documented in the patient’s chart that the patient ingested the medication at 22:30 when she knew the patient had done so at 20:45. The same patient asked that her baby be brought to her room following delivery. Respondent brought the baby to the room without verifying, pursuant to hospital protocol, that it was the correct baby for that patient. Respondent did not use the Hugs and Kisses tags that were placed on both the mother and baby to match the sound of the two tags to make sure the correct mother and baby were together. The baby was not the patient’s baby. The patient noticed it was not her baby and called Respondent back into the room to remove the infant and bring her the correct baby. Respondent did not initiate an incident report or chart the event.

REVOKED

Cailotto, Britt L
Steelville, MO
Registered Nurse 133592

On September 2, 2014, nursing home officials selected Respondent and other night shift employees to take a random urine drug screen. The nursing home received information from the lab that the sample Respondent submitted September 2, 2014 returned positive for Morphine. Revoked 06/27/2016

Decker, Cyndel Lee
Ballwin, MO
Licensed Practical Nurse 2009008984

On February 13, 2014, Respondent received a written counseling due to her failing to document patient vital signs and failing to complete patient assessments on multiple dates, and for her documenting the incorrect physician on multiple doctors’ orders. On December 3, 2014, Respondent was suspended from the agency for one (1) day and placed on probation for ninety (90) days due to her administering an ordered dose of Topamax twice to her patient and for throwing away a patient’s property without

REVOKED continued...

permission. On December 16, 2014, Respondent spanked a patient and spoke disrespectfully to the patient’s parent. Revoked 07/25/2016

Schall, Cynthia L
Highland, IL
Registered Nurse 146753

On March 10, 2015, Respondent stipulated, in a Consent Order from the Illinois Board of Nursing, that her nursing license in the state of Illinois was subject to discipline because she tested positive for alprazolam metabolites, a benzodiazepine and cocaine. Revoked 07/25/2016

Wirtz, Travis Michael
Kansas City, MO
Registered Nurse 2008007483

Respondent failed to call in to NTS on thirty-one (31) days. On January 18, 2016, and January 22, 2016, Respondent called NTS and was advised that he had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. Furthermore, on February 2, 2016, February 24, 2016, and March 16, 2016, Respondent failed to call NTS; however, these were days that Respondent had been selected to submit a sample for testing. Therefore, Respondent failed to report to a collection site to provide a sample for testing. On three (3) separate occasions, June 24, 2015; August 7, 2015; and December 10, 2015, Respondent reported to lab and submitted the required sample which showed a low creatinine reading. The Board did not receive an employer evaluation or statement of unemployment by the quarterly due date of January 18, 2016. Revoked 07/25/2016

Williams, Donna F
St. Louis, MO
Licensed Practical Nurse 031576

The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of April 8, 2016. As of April 28, 2016, the Board had not received an application to renew Respondent’s nursing license. Revoked 07/25/2016

Watkins, LaQuita Michelle
Columbia, MO
Licensed Practical Nurse 2015035766

The Board did not receive a continuing chemical dependency treatment update submitted on Respondent’s behalf by the documentation due date of April 5, 2016. The Board did not receive evidence of support group attendance by the documentation due date of April 5, 2016. On March 21, 2016, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of marijuana. Revoked 07/25/2016

REVOKED continued...


Safford, Trisha A
Centralia, MO
Licensed Practical Nurse 2000173075

Respondent was advised by certified mail to attend a meeting with the Board’s representative on April 28, 2015. Respondent did not attend the meeting or contact the Board to reschedule the meeting. In accordance with the terms of the Order, Respondent was required to undergo a mental health evaluation and follow any recommendations made by the evaluator. Respondent underwent a chemical dependency evaluation, which was received and accepted by the Board as meeting the mental health evaluation requirement on September 21, 2015. The evaluator recommended that Respondent attend weekly outpatient individual counseling. Pursuant to the Order and the evaluator’s recommendation, Respondent was required to submit quarterly updated mental health evaluations showing proof of compliance with the evaluator’s recommendations. The Board did not receive an updated mental health evaluation submitted on Respondent’s behalf by the quarterly due dates of June 4, 2015; October 9, 2015; January 11, 2016; or, April 11, 2016. Respondent was required to obtain continuing education hours the Board had not received proof of any completed hours. Revoked 07/19/2016

Davis, Candace N
St. Robert, MO
Licensed Practical Nurse 2011010056

Respondent failed to call in to NTS on sixty-one (61) days. Further, on February 23, 2016, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. In addition, on March 9, 2016; March 31, 2016; and April 6, 2016, Respondent failed to call NTS; however, these were days that Respondent had been selected to submit a sample for testing. Therefore, Respondent failed to report to a collection site to provide a sample for testing on March 9, 2016; March 31, 2016; and April 6, 2016. On April 29, 2016, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent reported to a collection site and provided a sample for screening. The sample which Respondent provided had a creatinine reading of less than 2.0. When Respondent first contracted with NTS, she was instructed to provide samples for drug and alcohol testing at approved collection sites or with an approved collector. Since January 1, 2016, Respondent submitted all of her samples for testing at Respondent’s place of employment. Respondent’s urine samples were purportedly signed as collected by a person not approved to collect samples for drug and alcohol testing for NTS. Additionally, that person has not been present at the place of employment since February 7, 2016, and her employment was terminated on February 22, 2016. The Board did not receive an

REVOKED continued on page 14



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REVOKED continued from page 13

employer evaluation or statement of unemployment by the documentation due date of May 6, 2016.

Revoked 07/19/2016

Cotton, Tammy Lynnise

Saint Louis, MO

Licensed Practical Nurse 058462

Respondent failed to call in to NTS on seven (7) days. Further, on October 19, 2015 and December 23, 2015, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. As part of the terms of her disciplinary period, Respondent was required to completely abstain from the use or consumption of alcohol in any form regardless of whether treatment was recommended. On April 11, 2016, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol, and Ethyl Sulfate, a metabolite of alcohol. Respondent admitted that she drank a wine cooler on April 9, 2016, when she learned she had failed the Registered Nurse NCLEX.

Revoked 07/19/2016

Russell, Brianna L

Saint Louis, MO

Licensed Practical Nurse 2005000647

From July 23, 2015 through March 23, 2016, Respondent failed to call in to NTS on two hundred and forty-five (245) consecutive days. Respondent failed to report to a collection site to provide a sample for testing on sixteen (16) days. The Board did not receive an employer evaluation or statement of unemployment by the documentation due dates of October 16, 2015 and January 18, 2016.

Revoked 07/19/2016

O'Reilly, Margaret Linda

Ringwood, NJ

Registered Nurse 2013030189

On December 21, 2015, the Colorado State Board of Nursing issued an Order suspending the nursing license of Respondent. On February 16, 2016, the Wisconsin Board of Nursing issued a Final Decision and Order in which Respondent voluntarily surrendered her Wisconsin nursing license.

Revoked 07/19/2016

Jefferies, Gevan LeeAnn

Platte City, MO

Registered Nurse 2008023432

From October 7, 2014 through April 27, 2016, Respondent failed to call in to NTS on fourteen (14) days. In addition, on February 22, 2016, Respondent reported to a lab and submitted the required sample which showed a low creatinine reading. On February 22, 2016, Respondent submitted a urine sample for random drug screening. That

REVOKED continued...

sample tested positive for the presence of morphine.

Revoked 07/19/2016

Vela, Lisa A

Neosho, MO

Registered Nurse 151595

Count I

An audit conducted of medication administration records for Respondent back through January 2013 revealed that Respondent had diverted 64 alprazolam 0.5 mg tablets; 64 oxycodone 7.5/325 mg tablets; 206 oxycodone 5/325 mg tablets; and 306 hydrocodone 5/325 mg tablets for specific patients that she was not assigned to care for and failed to document the administration or waste of any of those tablets or otherwise account for what happened to those medications. In addition to the above, Respondent diverted oxycodone, hydrocodone, and alprazolam on numerous other occasions for personal use for approximately one year.

Count II

On December 17, 2015, the Arkansas Board of Nursing issued Respondent an Order to Cease and Desist nursing practice in the State of Arkansas due to violations of the Arkansas Nurse Practice Act. In the Cease and Desist Order, the Arkansas Board states that it was reported that Respondent was terminated due to unaccounted for narcotics and discrepancies in documentation.

Revoked 06/27/2016

Rudisill, Carla Denise

Sikeston, MO

Licensed Practical Nurse 2012026665

On December 9, 2014, a packet of Norco that was meant to be wasted was reported missing. Respondent was asked to take a drug screen because she was the last person with custody of the Norco packet. Respondent signed a statement indicating that she refused to submit to the drug screen. Respondent stated that she did not submit to the drug test because she believed that she would test positive for Marijuana and Dilaudid, which she had previously consumed. She also admitted that she had taken the packet of Norco in question. Respondent was placed on the Employee Disqualification List by the Missouri Department of Health and Senior Services

Revoked 07/19/2016

Elledge, Aimee M

Saint Joseph, MO

Licensed Practical Nurse 057110

From October 20, 2014, until the filing of the Complaint on February 11, 2016, Respondent failed to call in to NTS on one day - March 28, 2015. Further, on June 23, 2015; October 12, 2015; November 5, 2015; and January 15, 2016, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. Pursuant to the Agreement, Respondent was required to undergo a mental health

REVOKED continued...

evaluation and if treatment was recommended, follow those recommendations and submit proof of compliance. Respondent underwent a mental health evaluation on November 4 and 11, 2014. Mr. B recommended further treatment to include outpatient psychotherapy for a least one year and continue attending co-dependency group on a weekly basis. Quarterly reports submitted from Respondent's therapist indicate that Respondent was a no-show and missed one session for the quarterly due date of June 30, 2015; Respondent missed one session with no reason given for missing the session for the quarterly due date of September 30, 2015; and Respondent missed two sessions with no reasons given for missing either session for the quarterly due date of December 30, 2015. Respondent failed to comply with the recommendations of the mental health professional.

Revoked 06/27/2016

Paulie, Richard Joseph

Parsons, KS

Registered Nurse 2011039048

On January 26, 2016, the Kansas State Board of Nursing, through a Default Order, denied reinstatement of Respondent's Kansas nursing license.

Revoked 06/27/2016

Spellman, Shalana Roxice

Saginaw, MI

Licensed Practical Nurse 2013023669

The Missouri State Board of Nursing received information from the Michigan State Board of Nursing via the NURSUS website that the nursing license of Respondent was suspended pending completion of disciplinary requirements of the Michigan State Board of Nursing in a Final Order dated December 6, 2013.

Revoked 07/18/2016

Moore, Ericka Renee

Saint Louis, MO

Licensed Practical Nurse 2010024993

The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of October 12, 2015, or January 11, 2016. The Board did not receive proof of any completed continuing education hours by the October 8, 2015 documentation due date.

Revoked 06/27/2016



Sovulewski, Katherine M

House Springs, MO

Registered Nurse 2005014038

On April 1, 2016, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol, and Ethyl Sulfate (EtS), another metabolite of alcohol. Respondent admitted to Dr. Greg Elam that she had consumed two (2) beers the day before the test.

Revoked 07/18/2016

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REVOKED continued...

Sooter, Marshall Nathanael
Branson, MO
Registered Nurse 2000164924
On May 30, 2013, Respondent was providing care for patient N.A. and the following medication errors were discovered:

- a. Respondent withdrew one syringe of 1 mg/ 1 ml of hydromorphone for patient N.A. at 11:40 a.m. and at 1:07 p.m. for a total of two doses. One dose was documented as given by another nurse at 1:15 p.m. Respondent failed to chart the administration, waste, or return of the second 1 mg/1 ml vial of hydromorphone.
- b. Respondent withdrew one vial of 25 mg/I promethazine at 2:56 p.m. for patient N.A. documenting the administration of the medication at 3: 11 p.m. However, patient N.A. did not have an order for promethazine.
- c. Respondent practiced outside of his scope as a nurse by administering a medication without orders for that medication.

On June 2, 2013, Respondent was providing care for patient B.T. and the following medication error was discovered:

- a. Respondent withdrew one syringe of 1 mg/1 ml of hydromorphone for patient B.T. at 2:12 p.m. and at 2:31 p.m. for a total of two doses. Patient B.T. had orders for one dose at 2:11 p.m. Respondent failed to document the administration of the ordered dose of hydromorphone. Additionally, Respondent failed to chart the administration, waste, or return of the second 1 mg/1 ml vial of hydromorphone.

On June 2, 2013, Respondent was providing care for patient T.K. and the following medication error was discovered:

- a. Patient T.K. had orders for 0.5 mg of lorazepam entered at 5:50 p.m. Respondent withdrew one syringe of 2 mg/1 ml of lorazepam for patient T.K. at 6:06 p.m. and documented the administration of 0.5 mg of lorazepam at 6:30 p.m. Respondent failed to chart the administration, waste, or return of the remaining 1.5 mg of lorazepam from the vial.

On June 9, 2013, Respondent was providing care for patient T.M. and the following medication error was discovered:

- a. Respondent withdrew one syringe of 4 mg/1 ml of morphine for patient T.M. at 10:30 a.m. and one syringe of 10 mg/1 ml of morphine for patient T.M. at 11:32 a.m. for a total of 14 mg of morphine withdrawn. Patient T.M. had orders for between 2 to 10 mg of morphine to be administered. Only 8 mg of morphine were documented as administered to patient T.M. Respondent failed to chart the administration, waste, or return of the remaining 6 mg of morphine.

On June 16, 2013, Respondent was providing care for patient S.H. and the following medication error was discovered:

- a. Patient S.H. had orders for 1 mg of lorazepam entered at 8:41 p.m. Respondent withdrew one 1 mg tablet of lorazepam for patient S.H. at 9:17 p.m. Respondent failed to chart the administration, waste, or return of the 1 mg tablet of lorazepam.

On June 17, 2013, Respondent was providing care for patient J.W. and the following medication error was discovered:

REVOKED continued...

- a. Patient J.W. had orders for 0.5 mg of hydromorphone entered at 3:39 a.m. Respondent withdrew one syringe of 1 mg/1 ml of lorazepam for patient J.W. at 3:41 a.m. and documented the administration of 0.5 mg of hydromorphone from the vial.

Respondent demonstrated inconsistent practice related to medication administration and waste. Accurate documentation related to medication administration is an essential function of being a nurse as poor documentation can jeopardize patient health and safety.
Revoked 06/27/2016

SUSPENSION

Urban, Randi Michelle
Knob Noster, MO
Registered Nurse 2008016911
Respondent was employed by a hospital from April 1, 2013, until her termination on January 10, 2014. On December 10, 2013, Respondent was assisting nurse A.R. with an intubation in one of the trauma rooms. This trauma room had a Rapid Sequence Intubation kit (“kit”) in it, which contained Propofol, Rocuronium, Succinylcholine and Etomidate that were packaged and ready to be used. Nurse A.R. and Respondent administered the Succinylcholine and Etomidate to the patient and wasted the remaining medication that was not administered. The patient was receiving a Propofol drip and was sedated; thus, the vials of Propofol and Rocuronium contained in the kit were not administered to the patient. Respondent left the trauma room with the unused and uncapped vials of Propofol and Rocuronium. Upon leaving the patient’s room, Respondent told M.M., the charge nurse, that she really needed to use the restroom. Respondent was in the restroom approximately twenty (20) minutes and another nurse reported to nurse M.M. that she believed Respondent may have passed out. Nurse M.M. took Respondent’s blood pressure which was adequate and informed Respondent that she needed to call the house supervisor and inform her of the episode. Respondent reported that she had a vasovagal episode in the restroom. Respondent was later observed to have blood running down her arm while sitting at the ER desk. The blood was pointed out to Respondent, she then was observed to get up and walk towards a bathroom, which was located a distance away instead of raising her sleeve to look at her arm or using the restroom located nearby. Later, while seated at the ER desk, Respondent started to exhibit seizure like activity and lowered herself to the floor. Respondent’s arms and legs were observed to be contracting up and she was unable to

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SUSPENSION continued...

respond. After approximately 2-3 minutes, Respondent was able to respond verbally and stated that she could hear everything the entire time she was seizing, which is inconsistent with someone having a seizure. Respondent was taken to an ER room and a hospital gown was put on her. Nurse M.B. noticed that Respondent would not straighten her left arm. Respondent informed M.B. that she could not straighten her arm. When Respondent’s arm was eventually straightened, nurse M.B. observed that Respondent had bruising in the AC area and a mark that looked like a puncture wound. Blood and urine were taken from Respondent at that time and submitted for testing. Respondent tested positive for Fentanyl and Propofol. Respondent admitted to the Board investigator that she had injected herself with Propofol in the bathroom.
Suspended 7/19/16-1/19/17; Probated 1/20/17-1/20/22

VOLUNTARY SURRENDER

Meyer, April Dawn
Jackson, MO
Registered Nurse 2005008602
Licensee voluntarily surrendered her Missouri nursing license, effective July 18, 2016.
Voluntary Surrender 07/18/2016

Lee, Linda Joyce
Matlacha, FL
Registered Nurse 2014034282
On May 5, 2015, Licensee agreed, in an Agreed Order from the Texas Board of Nursing, that her nursing license in the state of Texas was subject to discipline upon grounds for which suspension or revocation is authorized in this State. During January 8, 2013, through January 28, 2013, Licensee withdrew Morphine, Hydrocodone, Hydromorphone and Alprazolam from the Acudose-RX

VOLUNTARY SURRENDER continued on page 19



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LPN Yvonne T Wilson	Lees Summit	MO
LPN Carmen McClendon-Roberts	St Louis	MO
LPN Janet R Lang	Dixon	MO
LPN Vernetta A Melton	Ste Geneveve	MO
LPN Karen B Gaedike	Moscow Mills	MO
LPN Norma J Gritton	Madison	MO
LPN Dimple Joy Lockwood	Willard	MO
LPN Brenda J Smith	Paris	MO
LPN Janet H Booth	Humansville	MO
LPN Marcia S Martin	Fairfax	MO
LPN Betty L Lawrence	Saint Joseph	MO
LPN Patricia S Brady	Country Club	MO
LPN Ruth M Clerkley	Saint Louis	MO
LPN Yvonne Hopper	Saint Louis	MO
LPN Ruby L Johnson	Rock Hill	MO
LPN Margaret R Starks	Saint Louis	MO
LPN M Timothea Jansen, S	Saint Louis	MO
LPN Cheryl K Routh	Plattsburg	MO
LPN Mary A Heuer	Centralia	MO
LPN Rebecca D Steinmann	Monroe City	MO
LPN Shirley L Satterly	Rolla	MO
LPN Channey L Fleming	Saint Louis	MO
LPN Naomi Hampton	Saint Louis	MO
LPN Dianne T Czarnecki	Bonne Terre	MO
LPN Rosie M Williams	Saint Louis	MO
LPN Helen E Fishbeck	Hannibal	MO
LPN Carolyn S Savage	Nixa	MO
LPN Ruth E Schumacher	Higginsville	MO
LPN Marie A Candiano	Blue Springs	MO
LPN Lenda C Mcdonough	Poplar Bluff	MO
LPN Sandra K Biel	Manchester	MO
RN Donna S Wienberg	Concordia	MO
RN Colleen P Unger	Sikeston	MO
RN Donna S Pfeiffer	Dittmer	MO
RN Mary K O'Connor	Kansas City	MO
RN Nancy C Thornton Alves	Troy	IL
RN Charlotte A Steel	East Saint Louis	IL
RN Dyanne Y Kirk	Springfield	MO
RN Cheryl J Fair	Saint Louis	MO
RN Barbara B Coons	Lees Summit	MO
RN Marion M Reuter	Glencoe	MO
RN Karen O Mcnew	Ava	MO
RN Twyla K Martin	Joplin	MO
RN Judith A Voskamp	Lockwood	MO

RN Margaret B Merjavy	Chesterfield	MO
RN Linda M Dagartzikas	St Louis	MO
RN Martha N Rooney	Owensville	MO
RN Elizabeth Griessel	Nixa	MO
RN Jacqueline T Carton	Marshall	MO
RN Joellen Crosnoe	Cape Girardeau	MO
RN Marva M Dee	Saint Louis	MO
RN Deanna M Franklin	Osage Beach	MO
RN Mary K Soucy	Ivins	UT
RN Lucille I McLain	Clarkson Valley	MO
RN Helen H Saunders	Weatherby	MO
RN Carole V Surber	Raytown	MO
RN Sharon J Kendall	O Fallon	MO
RN Josephine G Olson	Kansas City	MO
RN Marilyn R Liddle	Wheaton	IL
RN Sharon V Schmitz	Nixa	MO
RN Betty M Sass	St Peters	MO
RN Marcella E Schellhase	Maryland Heights	MO
RN Sandra Rose Shannon	Eureka	MO
RN Ruth M Colt	Shell Knob	MO
RN Susan A Andres	Eldon	MO
RN Mary A Gibson	Saint Louis	MO
RN Carolyn M Fick	Columbia	MO
RN Connie D Wiegner	Saint Charles	MO
RN Patricia A Heldt	Hermann	MO
RN Patricia O Johnston	Lee's Summit	MO
RN Barbara A Horn	Arnold	MO
RN Linda K Beerman	St Charles	MO
RN Janet A Kreitz	Kirkwood	MO
RN Dianne J Epple	Morrison	MO
RN Sandra S Mcgrath	Ellisville	MO
RN Janice I Morton	Hazelwood	MO
RN Patricia M Law	Kansas City	MO
RN Mary A Stillman	Lake Saint Louis	MO
RN Georgia A Zimmerman	Saint Louis	MO
RN Mary V Politte	Frontenac	MO
RN Christian J Gohl	Shrewsbury	MO
RN Judith M Jeglijewski	Ballwin	MO
RN Anne M Wilson	Hannibal	MO
RN Ruth A Holzum	Saint Charles	MO
RN Margaret M Corrigan	Saint Louis	MO
RN Janet M Evers	Saint Louis	MO
RN Marguerite A Mckee	Chesterfield	MO
RN Sharon L Payne	Kansas City	MO
RN Mary E Barylski	Saint Louis	MO
RN Marigrace H Clarke	Saint Louis	MO
RN Maryann T Rice	Saint Louis	MO
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RN Martha D Staker	Kansas City	MO
RN Patricia S Habiger	Kansas City	MO

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RN Janet O Lewis	Kansas City	KS
RN Mattie J Eley	Kansas City	MO
RN Future M Jackson	Overland Park	KS
RN Barbara A Primm	Macon	MO
RN Mary A Oconnor	Kansas City	MO
RN Susan M Quirk	Frontenac	MO
RN Mary B Luebbering	Saint Thomas	MO
RN Rebecca A Dillow	Sullivan	MO
RN Pamela D Ruckman	Columbia	MO
RN Wilma S Brauer	Cole Camp	MO
RN Maryellen Donohue	Saint Louis	MO
RN Barba L Probstfield	Linn Creek	MO
RN Nancy W Hemphill	Overland Park	KS
RN Nancy B Scrivener	Cabool	MO
RN Carolyn C Lock	Carrollton	MO
RN Shirley J Farrah	Columbia	MO
RN Judith H Paul	Augusta	MO
RN Beth A Kenney	Canton	MO
RN Susan K Isenberg	Saint Louis	MO
RN Mary A Hawley	Dexter	MO
RN Brenda J Scott	Imperial	MO
RN Judith F Driscoll	Jacksonville	FL
RN Deanna E Dotson	St. Charles	MO
RN Ruth H Stiefvater	Saint Louis	MO
RN Patricia A Anslinger	Chesterfield	MO
RN Cynthia S Bernard	Sainte Genevieve	MO
RN Ruth Marian Boelter Boettcher	Jackson	MO
RN Mary Ann Ajo	Saint Louis	MO
RN Bonnie S Jacobs	Springfield	MO
RN Claudia J Richards	Independence	MO
RN Lenell S Dalrymple	Trenton	MO
RN Theodora F Skaggs	Spanish Lake	MO
RN Mary C Peterson	Kansas City	MO
RN Alverne M Eldridge	Saint Louis	MO
RN Rachel A Webb	Saint Louis	MO
RN Mattie J McAllister	Saint Louis	MO
RN Carrie A Rice-Harris	Kansas City	MO
RN Margo J Thomas	Saint Louis	MO
RN Alice Lorraine Mitchell	Saint Louis	MO
RN Kathleen S Bennett	Independence	MO
RN Sharon P Baldwin	Lees Summit	MO
RN Thelma J Colbert	O Fallon	MO
RN Margarite J Gillam	Potosi	MO
RN Marilyn Causey	Saint Louis	MO
RN Janet D Welker	Louisiana	MO
RN Nancy Herweck	O Fallon	MO
RN Marlyn L Smith	Eunice	MO
RN Donna W Moore	Creve Coeur	MO
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RN Anna N Allen	Kansas City	MO


2016 Golden Awards continued on page 18

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2016 Golden Awards continued from page 17

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RN Diana J Franklin	Lawrence	KS	RN Martha J Bastida	Manchester	MO	RN Melanie R Bernstein	Creve Coeur	MO
RN Margaret A Singh	Higginsville	MO	RN Sue E Revelle	Saint Louis	MO	RN Mary A Jacobs	Saint Louis	MO
RN Linda L Vielhauer	Shawnee	KS	RN Sharon S Coy	Cameron	MO	RN Pamela L Hodge	Marthasville	MO
RN Gwendolyn R Slabaugh	Springfield	MO	RN Wanda J Brinson	Barnard	MO	RN Helene M LaBerta	Fenton	MO
RN Alice M Winder	Farmington	MO	RN Brenda T Robertson	Birmingham	AL	RN Connie F Walls	Festus	MO
RN Janet M Lundstrom	Saint Louis	MO	RN Sandy Christman	Springfield	MO	RN Jeanette S McNutt	Saint Louis	MO
RN Rita M Brumfield	Ste Gene	MO	RN Diann Powell	Springfield	MO	RN Barbara S Cody	Saint Louis	MO
RN Sharon K Huey	Cape Girardeau	MO	RN Linda S Fletcher	Lake Ozark	MO	RN Jane R Humphrey	Saint Louis	MO
RN Patricia J Keen	House Spgs	MO	RN Gayle V Selby	Lenexa	KS	RN Annette L Barber	Harrisonville	MO
RN Dorothy V Johnson	Independence	MO	RN Sharon A Block	Lees Summit	MO	RN Rene S Schnake	Warrensburg	MO
RN Sandra L Jost	Wb Grv	MO	RN Carolyn S Long	Roeland Park	KS	RN Linda L Schuckman	Palm Beach Gardens	FL
RN Diana L Schmaltz	Fenton	MO	RN Janet M White	Gladstone	MO	RN Sharon F Stripling	Kansas City	MO
RN Ruth K Lloyd-Hulsey	Hermann	MO	RN Carol A Maune	Washington	MO	RN Linda L York	Shawnee Mission	KS
RN Christina R Dicecco	Chesterfield	MO	RN Ann E Magnetti	Ballwin	MO	RN Karen L Swatek	Sunrise Beach	MO
RN Karen L Matuszewski	Saint Louis	MO	RN Kathleen S Becker	Saint Louis	MO	RN Annetta E Torre	Saint Peters	MO
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VOLUNTARY SURRENDER continued from page 15

Medication Dispensing System for patients, but failed to accurately and completely document the medication.
Voluntary Surrender 07/25/2016

Bargiel, Andrea M
Granite City, IL
Registered Nurse 098955

Licensee was employed by a hospital in St. Louis, Missouri. Licensee was employed at the hospital in the float pool since 1985. On a proactive diversion report run by the hospital, Respondent was found above the standard deviation for the amount of Oxycodone that had been accessed. When confronted by a hospital official, Respondent admitted to taking controlled substances from the hospital. In 2015, Respondent was employed with an institution. On November 11, 2015, staff with the institution completed an audit of Respondent’s Pyxis pulls due to a report of high use by the Respondent. When the audit was compared with the medication administration documentation over numerous pills were unaccounted for that were attributable to Respondent. The unaccounted for medication included hydrocodone, morphine and oxycodone.
Voluntary Surrender 07/11/2016

Tuttle, Travis Wayne
Portageville, MO
Registered Nurse 2010034494

On August 27, 2015, Respondent pled guilty to counts I and II of the indictment which was the offense of Receipt of Child Pornography in violation of 18 U.S.C. §2252A(a)(2) and 18 U.S.C. §2252A(b)(1), and the offense of Possession of Child Pornography in violation of 18 U.S.C. §2252A(a)(5)(B) and 18 U.S.C. §2252A(b)(2) in the United States District Court, Eastern District of Missouri, in case number 4:15CR101-AGF. In count I, Respondent knowingly received five (5) graphic files depicting child pornography. In count II, Respondent knowingly possessed sixteen (16) image files depicting child pornography.
Voluntary Surrender 06/13/2016

Voigt, Trisha Marie
Nevada, MO
Licensed Practical Nurse 2002028977

On July 11, 2016, Licensee voluntarily surrendered her Missouri nursing license.
Voluntary Surrender 07/11/2016

Brewer, Sarah Joanna
Independence, MO
Licensed Practical Nurse 2014017945

Licensee voluntarily surrendered her Missouri nursing license effective August 22, 2016.
Voluntary Surrender 08/22/2016

Blankenship, Rose M
Lake Ozark, MO
Licensed Practical Nurse 053338

Licensee Voluntarily Surrendered her Missouri license effective 8/11/2016
Voluntary Surrender 08/11/2016

NOTIFICATION OF NAME AND/OR ADDRESS CHANGE

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☐ ADDRESS

☐ PHONE

☐ ALTERNATE PHONE

☐ EMail

☐ RN

☐ APRN

☐ LPN

Missouri License Number

Last 4 Digits of Social Security Number

NAME AS CURRENTLY IN OUR SYSTEM

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First Name (Printed)

NEW INFORMATION

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First Name

Middle Name

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Daytime Telephone Number

Alternate Phone Number

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CITY

STATE

ZIP

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STREET OR PO BOX

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STATE

ZIP

☐ I declare

as my primary state of residence effective

(primary state of residence)

(effective date)

☐ I am employed exclusively in the U.S. Military (Active Duty) or with the U.S. Federal Government and am requesting a Missouri single-state license regardless of my primary state of residence.

Information on the Nurse Licensure Compact can be found at www.ncsbn.org/nlc.htm
In accordance with the Nurse Licensure Compact “Primary State of Residence” is defined as the state of a person’s declared fixed, permanent and principal home for legal purposes; domicile. Documentation of primary state of residence that may be requested (but not limited to) includes:

- Driver’s license with a home address
- Voter registration card displaying a home address
- Federal income tax return declaring the primary state of residence
- Military Form no. 2058 – state of legal residence certificate
- W-2 from US Government or any bureau, division or agency thereof indicating the declared state of residence

Proof of any of the above may be requested.

When your primary state of residence is a non-compact state, your license will be designated as a single-state license valid only in Missouri.

When your primary state of residence is a compact state other than Missouri, your Missouri license will be placed on inactive status and you can practice in Missouri based on your unrestricted multi-state license from another compact state.

I solemnly declare and affirm, that I am the person who is referred to in the foregoing declaration of primary state of residence; that the statements therein are strictly true in every respect, under the pains and penalties of perjury.

→

Signature (This form must be signed)

Date

Complete, SIGN and Return to the Missouri State Board of Nursing, PO Box 656, Jefferson City, MO 65102 Or Fax to 573-751-6745 or Scan and Email to nursing@pr.mo.gov



McKnight Place

Director of Nursing

McKnight Place, an exclusive assisted living community, has an exciting opportunity for a **Director of Nursing**. If you are hands on, enjoy building relationships with residents and families, and have good clinical skills, we would like to speak with you. McKnight Place Assisted Living has a beautiful innovative team environment, excellent working conditions with low Resident-Staff Ratios. We offer great benefits which includes medical, dental, disability, 401(k), vacation, sick and holiday pay.

Inquire in person at **3 McKnight Place, St. Louis, MO 63124** or email your resume to **zdeutsch@mcknightplace.com**

We are currently seeking dedicated, compassionate professionals to join us in one of the following positions to provide excellent care to our residents.

We are hiring LPNs | FULL TIME & PART TIME

Sign On Bonus up to \$5,000

**Shift differentials for 3-11 and 11-7 *Vision, Health & Dental Insurance*
**PTO *Uniform Allowance *Perfect Attendance Bonus *Referral Bonuses*
**401K *Located in the heart of the Central West End.*

Bernard Care Center | Contact Dellneice Ringo, dringo@BernardCarellc.com
4335 West Pine Blvd. St. Louis, MO 63108 | 314-371-0200 or Apply Within

EOE

A Career to Feel Good About

ARJ Infusion Services is seeking talented registered nurses who thrive on delivering compassionate home infusion care to patients with rare and chronic conditions.

- Flexible scheduling and great work-life balance
- Comprehensive benefits package
- Professional development and training

➤ **Apply today!**
866-451-8804
arjinfusion.com/careers






Looking for RNs & LPNs

Residential positions from June to August at Camp Taum Sauk located on The Beautiful Black River in Lesterville, Missouri. Coed private summer camp ages 8 to 15. Salary plus room and board, family camperships. Swim, canoe, raft, horseback riding, hiking, ropes course, and more.

For more information call Nick Smith at 314-993-1655, nick@taumsauk.com, www.taumsauk.com






Metropolitan Community College

MCC staff and faculty members choose to work at MCC as it offers the best of two worlds: smaller campuses in thriving, close-knit neighborhoods, together with the rock-solid stability and excellent benefits of a large community college. Our faculty prefers the personal contact and the diverse learning environment characteristic of our small classes.

Part-time Nursing Faculty (Pool)

<http://jobs.mcckc.edu/postings/12571>

EOE/M/F/Vet/Disabled



Nursing Opportunities Available

- Flexible schedules
- On-site child care center
- Tuition reimbursement
- Free parking
- Premium Night Shift Differential
- Education Repayment or Sign-On Bonus available

We have openings in a variety of clinical areas.

St. Anthony's

Applicants can apply by visiting **stanthonys.jobs** or call **314-525-1272**.

St. Anthony's Medical Center, 10010 Kennerly Road, St. Louis, MO 63128



ShowMeVax

Missouri's Immunization Registry



Did You Know?

ShowMeVax is Missouri's free immunization registry that:

- is accessible through the web or EMR/EHR systems;
- helps eligible providers with EMR/EHR systems receive incentive payments;
- ensures patients are properly immunized;
- provides secure access for health care providers to patient immunization records (currently 41.6 million) throughout the state;
- reduces staff time spent obtaining immunization records; and
- simplifies vaccine ordering for the Vaccines for Children program providers.

For more information visit health.mo.gov/showmevax or contact the Bureau of Immunizations at 877.813.0933 or showmevaxsupport@health.mo.gov

